

Work Order ID 92981

November-12-12 3:33:22 PM

92981

Page 1

Item ID: 647.9013

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Fwd Clip

Start Date: 12/11/2012 Start Qty: 10.00

10

Cust Item ID:

Required Date: 03/12/2012 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan: *MLS*

Date: *12-11-13*

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr Revision Nbr

647.9000 N/C

110 0.00

110

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg

Dwg Rev: *N/C*

Prog Rev: *N/C*

2021.063

2-Deburr if necessary

120 QC2- Inspect parts off machine FAI/FAIB 0.00

120

QC

Memo

0.00

Quality Control

(6)

B/L-11-17

(16)

B/L-11-17

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 92981

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Page 2

Item ID: 647.9013

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Fwd Clip

Start Date: 12/11/2012 Start Qty: 10.00

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Cust Item ID:

Required Date: 03/12/2012 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

QC8- Inspect parts - second check

0.00

130

QC

Memo

0.00

Quality Control

140

Form as per dwg

0.00

140

Brake NC

Memo

0.00

Brake NC

150

QC5- Inspect part completeness to step on W/O

0.00

150

QC

Memo

0.00

Quality Control

16

16

16

SP
12/11/22

15
12/11/22

15
12/11/22

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
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		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 92981

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Page 3

Item ID: 647.9013

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Fwd Clip

Start Date: 12/11/2012 Start Qty: 10.00

10

Cust Item ID:

Required Date: 03/12/2012 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number Insp.
Stamp

160

Outsource process-Anodize per QSI017 4.1.10.1

0.00

160

Outsource4

Memo

0.00

Outsource process - Anodize

ISSUE P/O 18583
HARD ANODIZE, COLOR BLACK AS PER DWG.(SEE NOTE 2)

PL 12-5-12

170

Receive & Inspect for Damage & Mat'l Certs

0.00

170

Packaging

Memo

0.00

Packaging

PL 13/01/16 (16)

180

QC5- Inspect part completeness to step on W/O

0.00

180

QC

Memo

0.00

Quality Control

27
1343

16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 92981

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92981

Page 4

Item ID: 647.9013

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Fwd Clip

Start Date: 12/11/2012 Start Qty: 10.00

10

Cust Item ID:

Required Date: 03/12/2012 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

190

0.00

190

SprayPaint

Memo

0.00

16

0

0

13-5-11

Spray Painting

PRIME IAW MIL-P-23377J TYPE1 CLASS N AS PER DWG. (SEE NOTE 2)

PRIMER BATCH: 125452

200

QC14- Inspect Spray Paint

0.00

200

QC

Memo

0.00

Quality Control

DAS 16 13/15/16

(46)

210

Identify as per dwg & Stock Location: 57938P 0.00

210

Packaging

Memo

0.00

Packaging

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

43/07/17 (14)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/> <hr/>		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <hr/> <input type="checkbox"/> Other	

Work Order ID 92981***92981***

Page 5

Item ID: 647.9013

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Fwd Clip

Start Date: 12/11/2012 Start Qty: 10.00

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Cust Item ID:

Required Date: 03/12/2012 Req'd Qty: 10.00

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Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

220

QC21- Final Inspection - Work Order Release

0.00

220

QC

Memo

0.00

Quality Control

12/5/21

ML5 13-05-17

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
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Supplier <input type="checkbox"/>											
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Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

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Page 1
T

Work Order ID: 92981

92981

Parent Item: 647.9013

647 9013

Parent Item Name: Fwd Clip

Start Date: 12/11/2012

Required Date: 03/12/2012

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV: A 12.11.01 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M2024T3S.063		Purchased	No			110	sf	112.4200	0.034	0.357895	15	12-11-17	

M2024T3S 063

2024-T3 .063 sheet

**

Location

Loc Qty

Loc Code

MAT022

112.42

119916

0.1

121197

16.32

123654

96

121 197

16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTIC NO. 03266				SHEET 1 OF 2	
	DWG NO. 647.9000	REV: N/C	PREPARED BY A. QUAN	DATE: 11/15/11	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
	DWG TITLE: SHEETMETAL					
APPROVED BY: ENGR <i>[Signature]</i>		MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: CURRENT ORDER AND STOCK		
TRANSACTION CODES (TC) A-ADD C-CREATE R-REVISE D-DELETE		REASON: REVISED 647.9014 MATERIAL, REVISED DIMENSIONS OF P/N 647.9012				

SHEET 1, NOTES:

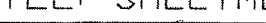


NOTES: UNLESS OTHERWISE SPECIFIED

- 1 MATERIAL: ALUMINUM 2024-T3 PER AMS-QQ-A-250/4
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK;
PRETREAT PR-148 ADHESION PROMOTER, PRIME IAW MIL-P-23377J, TYPE I, CLASS N
3. DEBURR AND BREAK ALL SHARP EDGES
4. IDENTIFY IAW MPP-120. LASER ETCH P/N AND REVISION 12PT. CENTURY GOTHIC.
5. ALL DIMENSIONS SHOWN PRIOR TO FINISH.
- 6 PART DIMENSIONS CONTROLLED BY CAD MODEL; FILE NAME: 647.9016 DOUBLER.SLDPRT-LAST MODIFIED 06-29-10
7. INSPECTION DIMENSIONS SHOWN WITH FINISH APPROX. 3-5 MIL MAX PER FACE.
- 8 MATERIAL: 304SS IAW AMS 5643
- 9 FINISH: PRIME IAW MIL-P-23377J, TYPE I, CLASS N

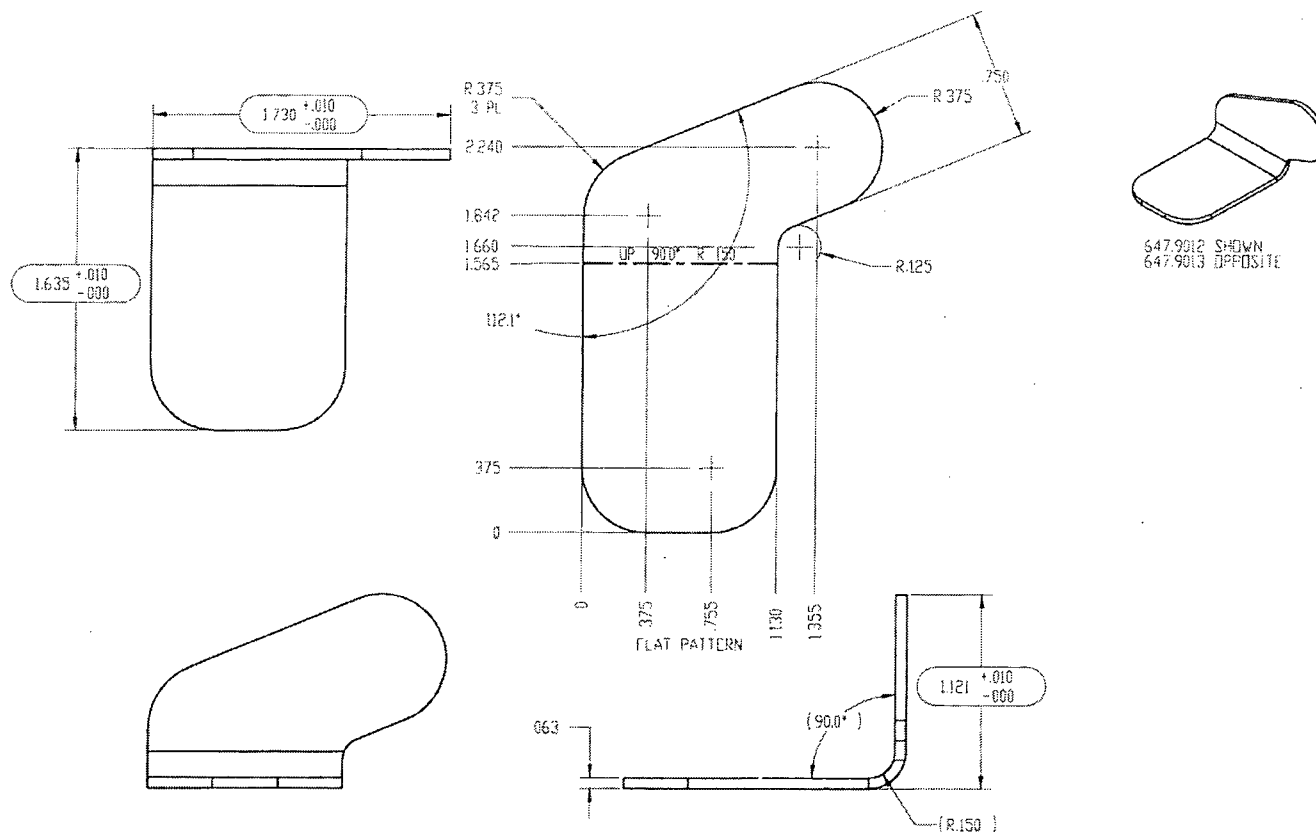
IS

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 929.81 MLJ
12-11-13

5	R	647.9014			STRUT BRACKET	8	9
F/N	TC	PART NUMBER	QTY		DESCRIPTION	MATERIAL	SPECIFICATION
DOCUMENTS EFFECTED:						CHANGE CATEGORY	DER REVIEW REQUIRED
<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM						<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTIC NO. 03213				SHEET 1 OF 1	
	DWG NO. 647.9000		REV: N/C	PREPARED BY A. QUAN	DATE: 11/09/11	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.
	DWG TITLE: SHEETMETAL					
APPROVED BY: ENGR 		MFG 		QC 		EFF: CURRENT ORDER AND STOCK
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE		REASON: REVISED 647.9013 DIMENSIONS				

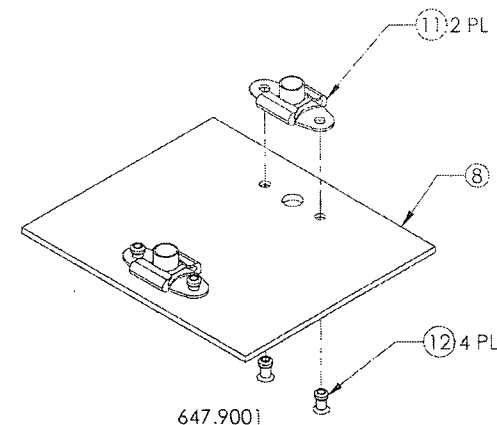
SHEET 3, IS:



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL	SPECIFICATION
DOCUMENTS EFFECTED:				<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input type="checkbox"/> BOM	CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

NOTES: UNLESS OTHERWISE SPECIFIED

1. MATERIAL: ALUMINUM 2024-T3 PER AMS-QQ-A-250/4
2. FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2. COLOR BLACK;
PRETREAT PR-148 ADHESION PROMOTER, PRIME IAW MIL-P-23377J, TYPE I, CLASS N
3. DEBURR AND BREAK ALL SHARP EDGES
4. IDENTIFY IAW MPP-120. LASER ETCH P/N AND REVISION 12PT. CENTURY GOTHIC.
5. ALL DIMENSIONS SHOWN PRIOR TO FINISH.
6. PART DIMENSIONS CONTROLLED BY CAD MODEL; FILE NAME: 647.9016 DOUBLER.SLDPRT-LAST MODIFIED 06-29-10
7. INSPECTION DIMENSIONS SHOWN WITH FINISH APPROX. 3-5 MIL MAX PER FACE.

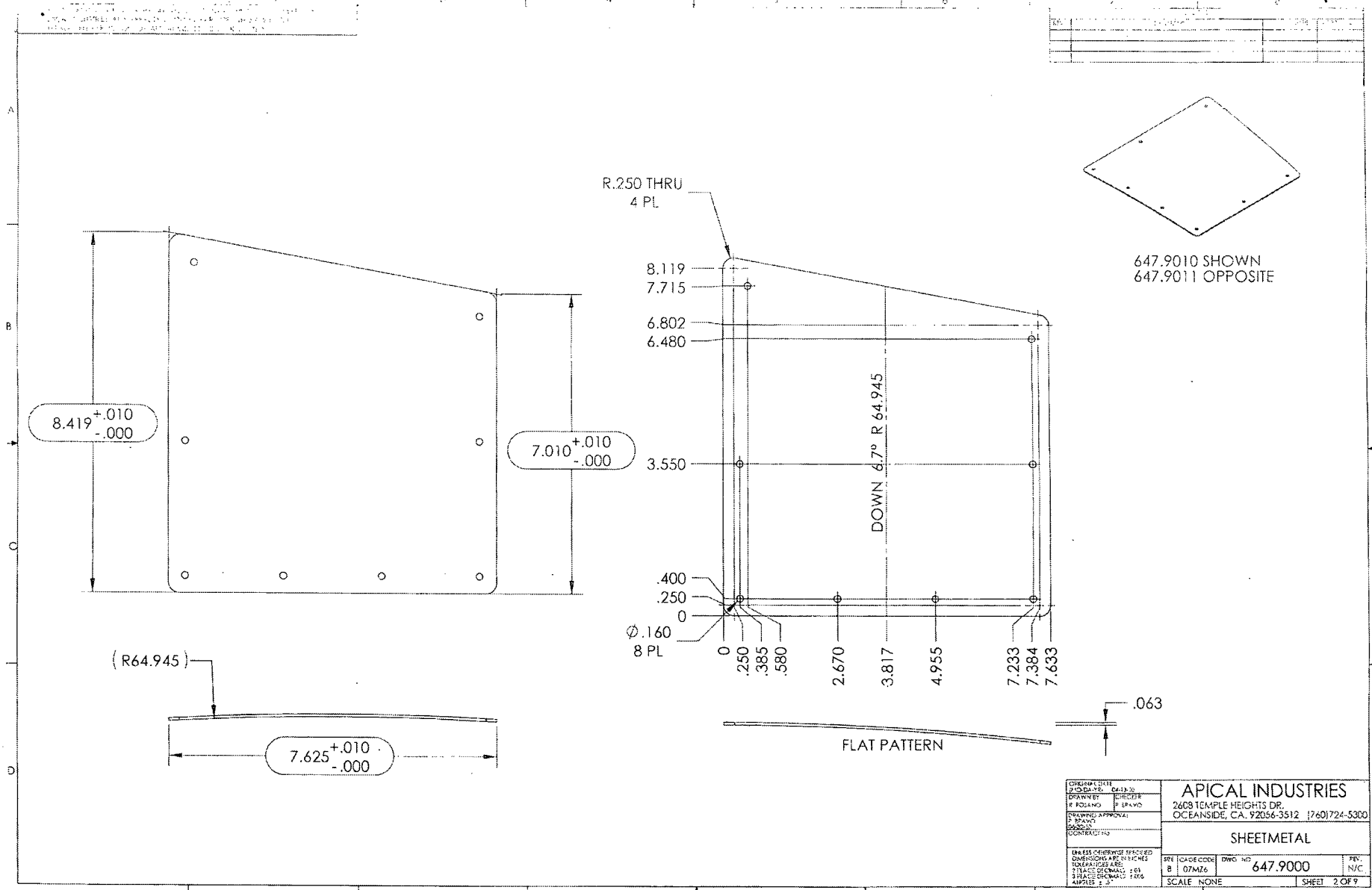


UNINCORPORATED ECN(S)

03213, 03266

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		2	11	601.1900	NUTPLATE	MCS101S-3		
			10	647.9019	HINGE			△
			9	647.9018	DOUBLER		△	△
		1	8	647.9017	DOUBLER		△	△
			7	647.9016	DOUBLER		△	△ △
			6	647.9015	DOUBLER		△	
			5	647.9014	STRUT BRACKET		△	△
			4	647.9013	FWD CLIP		△	
			3	647.9012	PWD CLIP		△	
			2	647.9011	DOUBLER		△	
		X	1	647.9010	DOUBLER		△	△
				647.9001	DOUBLER ASSY		△	△
		9001	FIND #	PART #	DESCRIPTION	MAT'L	SPEC.	
QTY					PARTS LIST			
NEXT ASSY [S]					APICAL INDUSTRIES			
647.8900					2608 TEMPLE HEIGHTS DR.			
647.9400					OCEANSIDE, CA 92056-3512 (760)724-5300			
					SHEETMETAL			
ORIGINAL DATE PROJECT NO. DRAWN BY CHECKED BY DESIGNED BY REVISIONS					MATERIAL SPECIFICATIONS SPECIFICATIONS ARE: STEEL THICKNESS .075" STEEL GRADE A36 WELD TYPE MIG			
					MFG CASE CODE B D/M/M SCALE: NONE			
					DWG NO: 647.9000			
					SHEET 1 OF 1			

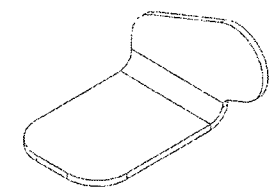
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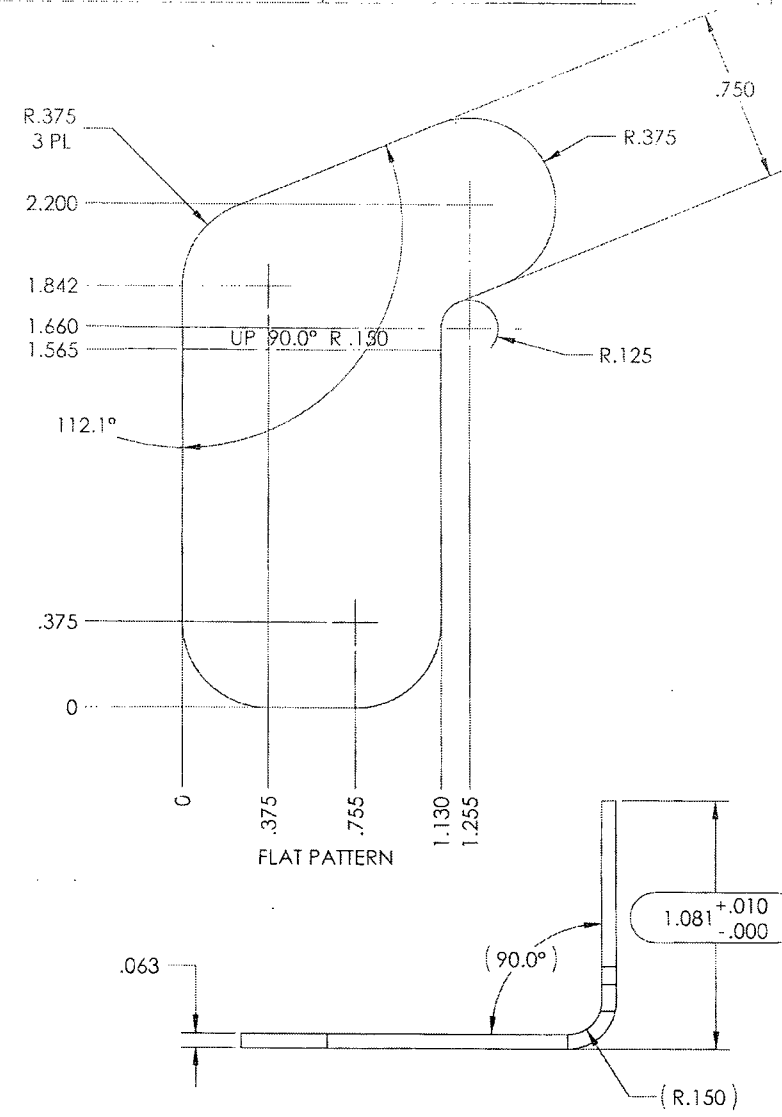
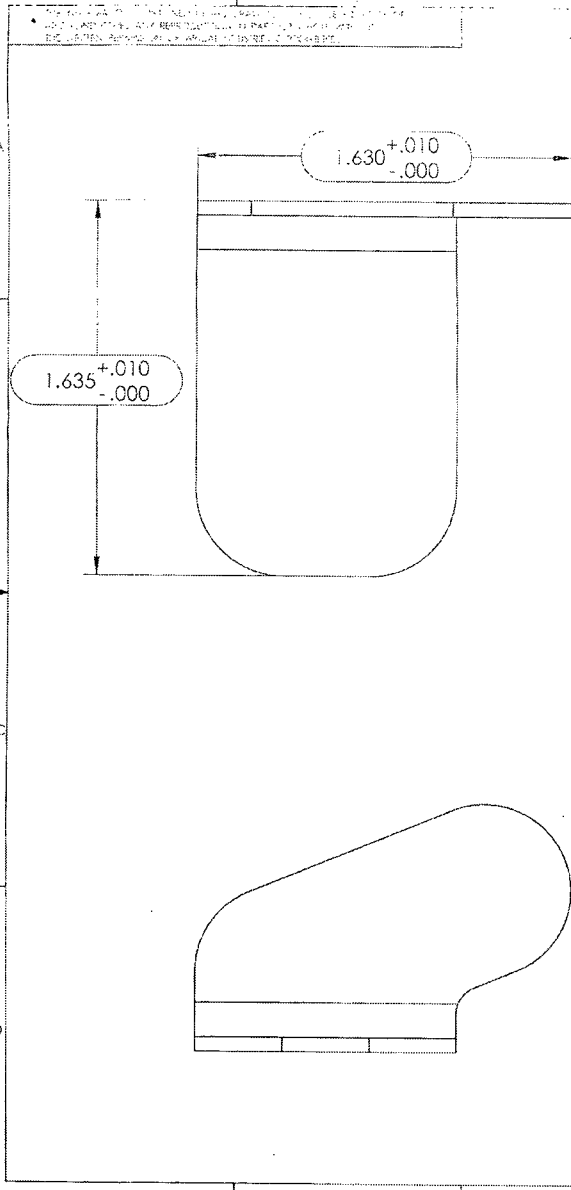
ORIGINAL DATE 10-18-20		APICAL INDUSTRIES	
DRAWN BY E. ROSANO	CHECKED P. BRAY	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
DRAWING APPROVAL P. BRAY		SHEETMETAL	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ±.01 ANGLES ±.5°		SHEET B 07M26	REV. N/C
SCALE NONE		DWG NO 647.9000	SHEET 2 OF 9

92981

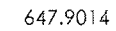
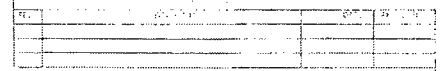
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647.9012 SHOWN
647.9013 OPPOSITE

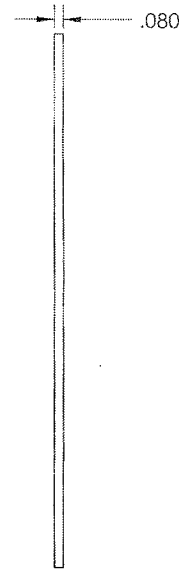
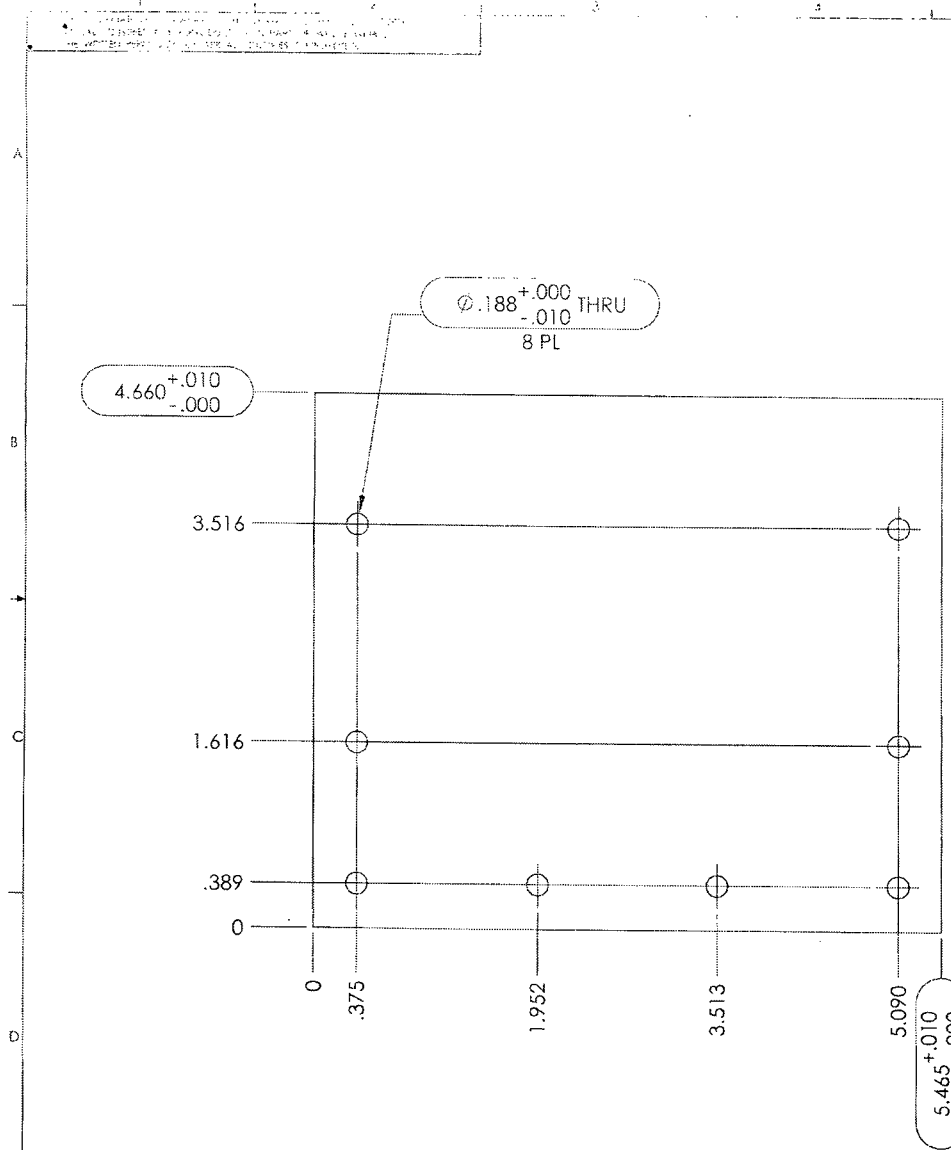


ORIGINAL DATE 10/10/00		2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWN BY R. FOLAND	CHECKED BY P. BELVO	SHEETMETAL	
DRAWING APPROVAL P. BELVO	DATE 07/12/06	DWD. NO. 647.9000	REV. N/C
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ±.01 DECIMALS ±.005 ANGLES ±.5°		SCALE NONE	SHEET 3 OF 9

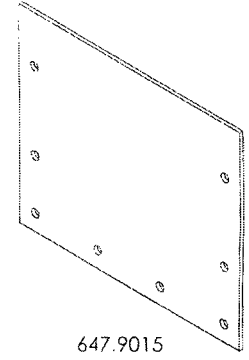
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ORIGINAL DATE (MO/DA/YR) 02-19-10 DRAWN BY P. POLANO P. BRAYNO CHECKED BY P. POLANO P. BRAYNO APPROVED BY P. POLANO CONFIRMED BY P. POLANO	APICAL INDUSTRIES 2605 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300		
SHEETMETAL			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES FINISHES ARE AS SHOWN 2" x 4" COLUMNS 101 4" x 6" COLUMNS 106 ANGLE 101			
SHEET 07M25	CASE CODE 07M25	ORDER NO. 647.9000	REV. N/C
SCALE ANGLE 1:1			SHEET 4 OF 9

92981



REV	DATE	BY	CHK

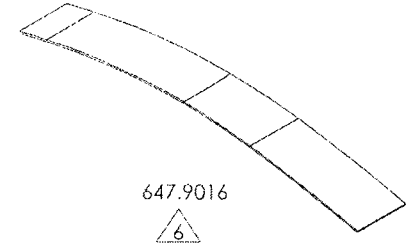
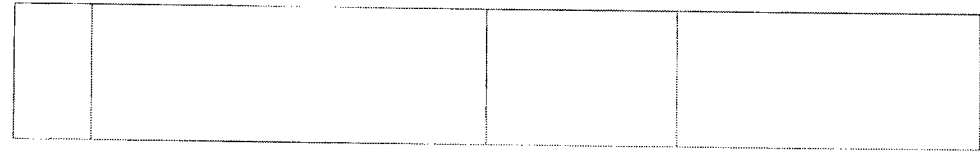


647.9015

<small> ORIGINAL DATE SUBMITTED BY DESIGNED BY CHECKED BY DRAWING APPROVAL BY DATE CONTRACT NO. </small>		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
<small> UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES FINISHES 3 PLACE DECIMALS ±.005 ANGLES 1/2° </small>		SHEET CODE B	DWG. NO. 647.9000
SCALE NONE		REV. NYC	SHEET 5 OF 9

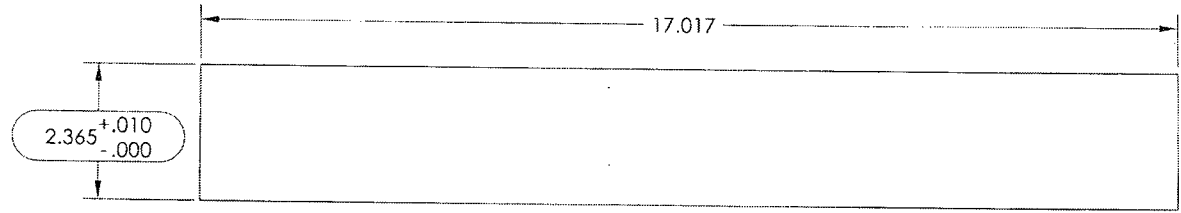
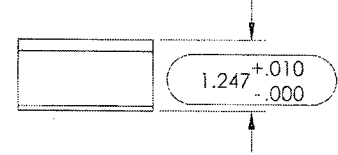
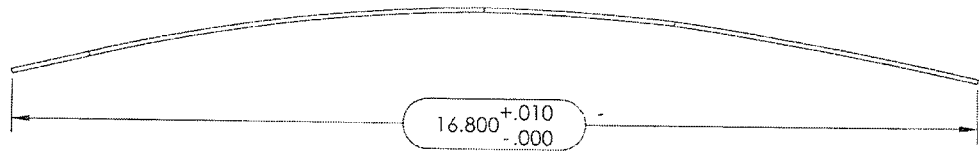
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REV	DATE	DESCRIPTION



647.9016

6



FLAT PATTERN

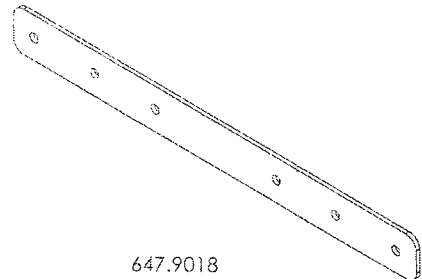
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ORIGINAL DATE: 08/13/06 DESIGNED BY: J. BRAY DRAWING APPROVAL: J. BRAY CONTRACT NO:	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92054-3512 (760) 724-5300
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES DIMENSIONS ARE TO CENTER DIMENSIONS ARE TO CENTER DIMENSIONS ARE TO CENTER	SHEETMETAL SHEET NO: 647.9000 SCALE: NONE SHEET 6 OF 9

[illegible][illegible]

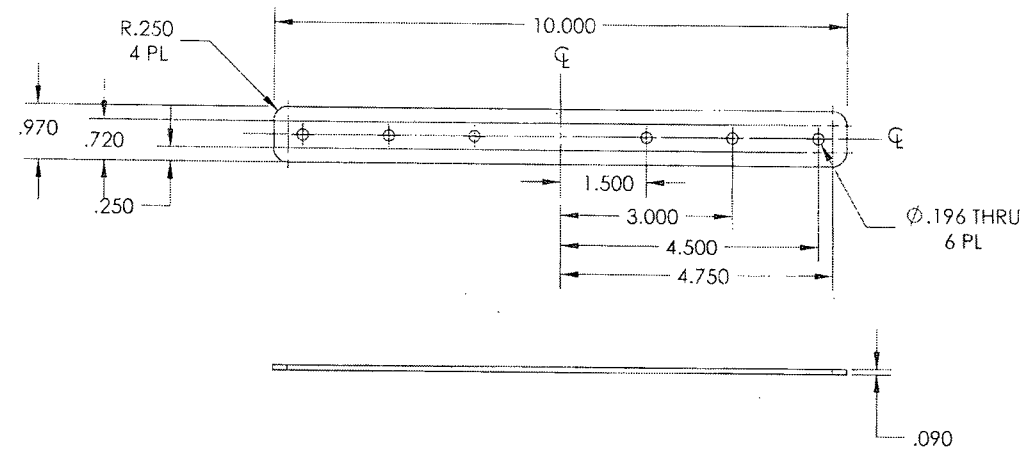
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DATE	BY	CHKD	APPD



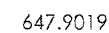
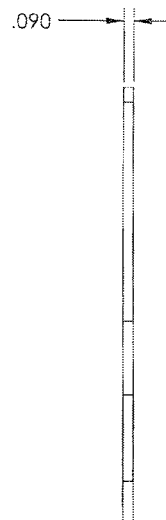
647.9018

PR2



ORIGINAL DATE: 04-13-10		APICAL INDUSTRIES	
DESIGNED BY: J. B. BRYAN	CHECKED BY: J. B. BRYAN	2608 TEMPLE HEIGHTS DR.	
DRAWING APPROVAL: J. B. BRYAN		OCEANSIDE, CA. 92056-3512 (760) 724-5300	
CONTRACT NO.:		SHEETMETAL	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES		REV: B	DATE: 07/16/16
EXPANDED ARE: 1. PLACE DIMENSIONS IN INCHES 2. PLACE DIMENSIONS IN INCHES 3. PLACE DIMENSIONS IN INCHES		QWS NO: 647.9000	REV: N/C
		SCALE: NONE	SHEET: 8 OF 9

1. The first step in the process of the investigation is the identification of the problem. This is done by the investigator who is responsible for the study. The investigator must first identify the problem and then determine the scope of the study. The next step is to design the study. This involves determining the methods to be used and the data to be collected. The third step is to collect the data. This is done by the investigator who is responsible for the study. The fourth step is to analyze the data. This is done by the investigator who is responsible for the study. The fifth step is to interpret the results. This is done by the investigator who is responsible for the study. The sixth step is to write the report. This is done by the investigator who is responsible for the study. The seventh step is to present the results. This is done by the investigator who is responsible for the study. The eighth step is to discuss the results. This is done by the investigator who is responsible for the study. The ninth step is to conclude the study. This is done by the investigator who is responsible for the study. The tenth step is to publish the results. This is done by the investigator who is responsible for the study.



TAG	X LOC	Y LOC	SIZE
A1	.455	.382	Ø.201 THRU
B1	.867	3.573	Ø.130 THRU
B2	1.614	2.266	Ø.130 THRU
C1	1.939	.312	Ø.250 THRU

ORIGINAL DATE (M/D/Y)	04-13-95	APICAL INDUSTRIES			
DRAWN BY	CHRISTEN	2608 TEMPLE HEIGHTS DR.			
R. JOHNSON	BY NUC	OCEANSIDE, CA. 92056-3512 (760)724-5300			
DATE OF APPROVAL		SHEETMETAL			
BY					
DATE					
CONTRACT NO.					
NONSUSCEPTIBLE TO CORROSION DIMENSIONS ARE IN INCHES 1/8" TOLERANCE ARE: 1/16" FOR DIMENSIONS 1" AND UNDER 1/32" FOR DIMENSIONS 1" TO 2" 1/16" FOR DIMENSIONS 2" TO 4" 1/8" FOR DIMENSIONS 4" TO 6" 1/4" FOR DIMENSIONS 6" TO 12" 3/16" FOR DIMENSIONS 12" TO 24" 1/2" FOR DIMENSIONS 24" TO 48" 5/8" FOR DIMENSIONS 48" TO 96" 3/4" FOR DIMENSIONS 96" TO 144" 1" FOR DIMENSIONS 144" TO 192" 1 1/4" FOR DIMENSIONS 192" TO 288" 1 1/2" FOR DIMENSIONS 288" TO 384" 1 3/4" FOR DIMENSIONS 384" TO 480" 2" FOR DIMENSIONS 480" TO 576" 2 1/4" FOR DIMENSIONS 576" TO 672" 2 1/2" FOR DIMENSIONS 672" TO 768" 2 3/4" FOR DIMENSIONS 768" TO 864" 3" FOR DIMENSIONS 864" TO 960" 3 1/4" FOR DIMENSIONS 960" TO 1056" 3 1/2" FOR DIMENSIONS 1056" TO 1152" 3 3/4" FOR DIMENSIONS 1152" TO 1248" 4" FOR DIMENSIONS 1248" TO 1344" 4 1/4" FOR DIMENSIONS 1344" TO 1440" 4 1/2" FOR DIMENSIONS 1440" TO 1536" 4 3/4" FOR DIMENSIONS 1536" TO 1632" 5" FOR DIMENSIONS 1632" TO 1728" 5 1/4" FOR DIMENSIONS 1728" TO 1824" 5 1/2" FOR DIMENSIONS 1824" TO 1920" 5 3/4" FOR DIMENSIONS 1920" TO 2016" 6" FOR DIMENSIONS 2016" TO 2112" 6 1/4" FOR DIMENSIONS 2112" TO 2208" 6 1/2" FOR DIMENSIONS 2208" TO 2304" 6 3/4" FOR DIMENSIONS 2304" TO 2400" 7" FOR DIMENSIONS 2400" TO 2496" 7 1/4" FOR DIMENSIONS 2496" TO 2592" 7 1/2" FOR DIMENSIONS 2592" TO 2688" 7 3/4" FOR DIMENSIONS 2688" TO 2784" 8" FOR DIMENSIONS 2784" TO 2880" 8 1/4" FOR DIMENSIONS 2880" TO 2976" 8 1/2" FOR DIMENSIONS 2976" TO 3072" 8 3/4" FOR DIMENSIONS 3072" TO 3168" 9" FOR DIMENSIONS 3168" TO 3264" 9 1/4" FOR DIMENSIONS 3264" TO 3360" 9 1/2" FOR DIMENSIONS 3360" TO 3456" 9 3/4" FOR DIMENSIONS 3456" TO 3552" 10" FOR DIMENSIONS 3552" TO 3648" 10 1/4" FOR DIMENSIONS 3648" TO 3744" 10 1/2" FOR DIMENSIONS 3744" TO 3840" 10 3/4" FOR DIMENSIONS 3840" TO 3936" 11" FOR DIMENSIONS 3936" TO 4032" 11 1/4" FOR DIMENSIONS 4032" TO 4128" 11 1/2" FOR DIMENSIONS 4128" TO 4224" 11 3/4" FOR DIMENSIONS 4224" TO 4320" 12" FOR DIMENSIONS 4320" TO 4416" 12 1/4" FOR DIMENSIONS 4416" TO 4512" 12 1/2" FOR DIMENSIONS 4512" TO 4608" 12 3/4" FOR DIMENSIONS 4608" TO 4704" 13" FOR DIMENSIONS 4704" TO 4800" 13 1/4" FOR DIMENSIONS 4800" TO 4896" 13 1/2" FOR DIMENSIONS 4896" TO 4992" 13 3/4" FOR DIMENSIONS 4992" TO 5088" 14" FOR DIMENSIONS 5088" TO 5184" 14 1/4" FOR DIMENSIONS 5184" TO 5280" 14 1/2" FOR DIMENSIONS 5280" TO 5376" 14 3/4" FOR DIMENSIONS 5376" TO 5472" 15" FOR DIMENSIONS 5472" TO 5568" 15 1/4" FOR DIMENSIONS 5568" TO 5664" 15 1/2" FOR DIMENSIONS 5664" TO 5760" 15 3/4" FOR DIMENSIONS 5760" TO 5856" 16" FOR DIMENSIONS 5856" TO 5952" 16 1/4" FOR DIMENSIONS 5952" TO 6048" 16 1/2" FOR DIMENSIONS 6048" TO 6144" 16 3/4" FOR DIMENSIONS 6144" TO 6240" 17" FOR DIMENSIONS 6240" TO 6336" 17 1/4" FOR DIMENSIONS 6336" TO 6432" 17 1/2" FOR DIMENSIONS 6432" TO 6528" 17 3/4" FOR DIMENSIONS 6528" TO 6624" 18" FOR DIMENSIONS 6624" TO 6720" 18 1/4" FOR DIMENSIONS 6720" TO 6816" 18 1/2" FOR DIMENSIONS 6816" TO 6912" 18 3/4" FOR DIMENSIONS 6912" TO 7008" 19" FOR DIMENSIONS 7008" TO 7104" 19 1/4" FOR DIMENSIONS 7104" TO 7200" 19 1/2" FOR DIMENSIONS 7200" TO 7296" 19 3/4" FOR DIMENSIONS 7296" TO 7392" 20" FOR DIMENSIONS 7392" TO 7488" 20 1/4" FOR DIMENSIONS 7488" TO 7584" 20 1/2" FOR DIMENSIONS 7584" TO 7680" 20 3/4" FOR DIMENSIONS 7680" TO 7776" 21" FOR DIMENSIONS 7776" TO 7872" 21 1/4" FOR DIMENSIONS 7872" TO 7968" 21 1/2" FOR DIMENSIONS 7968" TO 8064" 21 3/4" FOR DIMENSIONS 8064" TO 8160" 22" FOR DIMENSIONS 8160" TO 8256" 22 1/4" FOR DIMENSIONS 8256" TO 8352" 22 1/2" FOR DIMENSIONS 8352" TO 8448" 22 3/4" FOR DIMENSIONS 8448" TO 8544" 23" FOR DIMENSIONS 8544" TO 8640" 23 1/4" FOR DIMENSIONS 8640" TO 8736" 23 1/2" FOR DIMENSIONS 8736" TO 8832" 23 3/4" FOR DIMENSIONS 8832" TO 8928" 24" FOR DIMENSIONS 8928" TO 9024" 24 1/4" FOR DIMENSIONS 9024" TO 9120" 24 1/2" FOR DIMENSIONS 9120" TO 9216" 24 3/4" FOR DIMENSIONS 9216" TO 9312" 25" FOR DIMENSIONS 9312" TO 9408" 25 1/4" FOR DIMENSIONS 9408" TO 9504" 25 1/2" FOR DIMENSIONS 9504" TO 9600" 25 3/4" FOR DIMENSIONS 9600" TO 9696" 26" FOR DIMENSIONS 9696" TO 9792" 26 1/4" FOR DIMENSIONS 9792" TO 9888" 26 1/2" FOR DIMENSIONS 9888" TO 9984" 26 3/4" FOR DIMENSIONS 9984" TO 10080" 27" FOR DIMENSIONS 10080" TO 10176" 27 1/4" FOR DIMENSIONS 10176" TO 10272" 27 1/2" FOR DIMENSIONS 10272" TO 10368" 27 3/4" FOR DIMENSIONS 10368" TO 10464" 28" FOR DIMENSIONS 10464" TO 10560" 28 1/4" FOR DIMENSIONS 10560" TO 10656" 28 1/2" FOR DIMENSIONS 10656" TO 10752" 28 3/4" FOR DIMENSIONS 10752" TO 10848" 29" FOR DIMENSIONS 10848" TO 10944" 29 1/4" FOR DIMENSIONS 10944" TO 11040" 29 1/2" FOR DIMENSIONS 11040" TO 11136" 29 3/4" FOR DIMENSIONS 11136" TO 11232" 30" FOR DIMENSIONS 11232" TO 11328" 30 1/4" FOR DIMENSIONS 11328" TO 11424" 30 1/2" FOR DIMENSIONS 11424" TO 11520" 30 3/4" FOR DIMENSIONS 11520" TO 11616" 31" FOR DIMENSIONS 11616" TO 11712" 31 1/4" FOR DIMENSIONS 11712" TO 11808" 31 1/2" FOR DIMENSIONS 11808" TO 11904" 31 3/4" FOR DIMENSIONS 11904" TO 12000" 32" FOR DIMENSIONS 12000" TO 12096" 32 1/4" FOR DIMENSIONS 12096" TO 12192" 32 1/2" FOR DIMENSIONS 12192" TO 12288" 32 3/4" FOR DIMENSIONS 12288" TO 12384" 33" FOR DIMENSIONS 12384" TO 12480" 33 1/4" FOR DIMENSIONS 12480" TO 12576" 33 1/2" FOR DIMENSIONS 12576" TO 12672" 33 3/4" FOR DIMENSIONS 12672" TO 12768" 34" FOR DIMENSIONS 12768" TO 1					



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62149

Date: 14-Jan-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description	Rev:	
1 lot	Part: ASST		
	24 PCS 647.2510		
	PASSIVATE PER QQ-P-35		
	1 PC 647.1613		
	12 PCS 647.1712		
	3 PCS 647.1810		
	40 PCS 647.1812		
	2 PCS 647.1813		
	1 PC 647.1816		
	20 PCS 646.3312		
	10 PCS 646.3714		
	40 PCS 646.3718		
	20 PCS 646.3811		
	6 PCS 647.7910		
	12 PCS 647.7912		
	6 PCS 647.7916		
	40 PCS 647.9012		
	10 PCS 647.9013		
	19 PCS 647.9016		
	30 PCS 647.9016		
	30 PCS 647.9017		
	60 PCS 647.9017		
	HARD ANODIZE BLACK		
	MIL-A-8625 TYPE III CLASS 2		
	Job: 20130027	PO: PO18583	Line:



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Pack List

Number: 62149

Date: 14-Jan-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms	Ship Via
Quantity	
Description	
Certificate of Conformance	
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.	
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY	
DATE : 14/1/13	
CERTIFIED SIGNATURE : 	
RECEIVER SIGNATURE : _____	